



POTENTIAL HAZARDOUS WASTE SITE
TENTATIVE DISPOSITION

State - TX

REGION

SITE NUMBER

VI

TXD981046873

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

TXD981046873

A. SITE NAME

Southern Pacific Transportation Co.

B. STREET

4910 Liberty Rd

C. CITY

Houston (Harris County)

D. STATE

TX

E. ZIP CODE

77001

II. TENTATIVE DISPOSITION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

| RECOMMENDATION | MARK 'X' | ACTION AGENCY | | | |
|---|----------|---------------|-------|-------|---------------------|
| | | EPA | STATE | LOCAL | PRIVATE |
| A. NO ACTION NEEDED -- NO HAZARD | | | | | |
| B. INVESTIGATIVE ACTION(S) NEEDED (If yes, complete Section III.) | | | | | |
| C. REMEDIAL ACTION NEEDED (If yes, complete Section IV.) | | | | | |
| D. ENFORCEMENT ACTION NEEDED (if yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.) | | X | X | | (RCRA jurisdiction) |

E. RATIONALE FOR DISPOSITION: This 25 acre site is an inactive wood treating facility that has been owned and operated by "SPT" since 1957. The wood treating operation closed in 1984, however there remains an active railroad works yard. As early as 1929, the T & N.O. RR operated a wood preserving co. from this property. Located on site was a large wastewater lagoon which has since been filled. The "SPT" also operated a surface impoundment, clay-lined, from 1979 to its closing in 1984. The impoundment contained about 1600 cubic yds of creosote contaminated tank bottoms, contaminated spill material; 200 cubic yds were removed during impoundment closing. Monitoring well indicate groundwater contamination to a depth of 20 ft. Wastewater discharge permit was revoked in the 70's due to high conc. of phenols. Due to all of the above, this site warrants further RCRA investigation/enforcement.

F. INDICATE THE ESTIMATED DATE OF FINAL DISPOSITION (mo., day, & yr.)

G. IF A CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE THE ESTIMATED DATE ON WHICH THE PLAN WILL BE DEVELOPED (mo., day, & yr.)

H. PREPARER INFORMATION

1. NAME

J. De Carlo Ciccol (6 HES)

2. TELEPHONE NUMBER

(214) 655-6740

3. DATE (mo., day, & yr.)

3/30/87

III. INVESTIGATIVE ACTIVITY NEEDED

A. IDENTIFY ADDITIONAL INFORMATION NEEDED TO ACHIEVE A FINAL DISPOSITION.

IF RCRA is determined not to have jurisdiction, SIF should be completed

B. PROPOSED INVESTIGATIVE ACTIVITY (Detailed Information)

| 1. METHOD FOR OBTAINING NEEDED ADDITIONAL INFO. | 2. SCHEDULED DATE OF ACTION (mo, day, & yr) | 3. TO BE PERFORMED BY (EPA, Contractor, State, etc.) | 4. ESTIMATED MANHOURS | 5. REMARKS |
|---|---|--|-----------------------|----------------|
| a. TYPE OF SITE INSPECTION | | | | |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| b. TYPE OF MONITORING | | | | SUPERFUND FILE |
| (1) | | | | |
| (2) | | | | FEB 04 1993 |
| c. TYPE OF SAMPLING | | | | REORGANIZED |
| (1) | | | | |
| (2) | | | | |



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Continued From Front

III. INVESTIGATIVE ACTIVITY NEEDED and PART B-PROPOSED INVESTIGATIVE ACTIVITY (Continued)**d. TYPE OF LAB ANALYSIS**

(1) _____

(2) _____

e. OTHER (specify)

(1) _____

(2) _____

C. ELABORATE ON ANY OF THE INFORMATION PROVIDED IN PART B (on front & above) AS NEEDED TO IDENTIFY ADDITIONAL INVESTIGATIVE WORK.**D. ESTIMATED MANHOURS BY ACTION AGENCY**

| 1. ACTION AGENCY | 2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES | 1. ACTION AGENCY | 2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES |
|-------------------|--|--------------------|--|
| a. EPA | | b. STATE | |
| c. EPA CONTRACTOR | | d. OTHER (specify) | |

IV. REMEDIAL ACTIONS**A. SHORT TERM/EMERGENCY STRATEGY (On Site & Off-Site):** List all emergency actions needed to bring site under immediate control, e.g., restrict access, provide alternate water supply, etc. See instructions for a list of Key Words for each of the actions to be used in the space below.

| 1. ACTION | 2. EST. START DATE (mo, day, & yr) | 3. EST. END DATE (mo, day, & yr) | 4. ACTION AGENCY (EPA, State, Private Party) | 5. ESTIMATED COST | 6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED |
|-----------|---------------------------------------|-------------------------------------|---|-------------------|---|
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |

B. LONG TERM STRATEGY (On Site & Off-Site): List all long term solutions, e.g., excavation, removal, ground water monitoring wells, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

| 1. ACTION | 2. EST. START DATE (mo, day, & yr) | 3. EST. END DATE (mo, day, & yr) | 4. ACTION AGENCY (EPA, State, Private Party) | 5. ESTIMATED COST | 6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED |
|-----------|---------------------------------------|-------------------------------------|---|-------------------|---|
| | | | | \$ | |
| | | | | \$ | |
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| | | | | \$ | |
| | | | | \$ | |

C. ESTIMATED MANHOURS AND COST BY ACTION AGENCY

| 1. ACTION AGENCY | 2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES | 3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES | 1. ACTION AGENCY | 2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES | 3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES |
|--------------------|--|--|--------------------|--|--|
| a. EPA | | | b. STATE | | |
| c. PRIVATE PARTIES | | | d. OTHER (specify) | | |